

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767509

FILED
Mar 20, 2009
Secretary of State

Entity Name: BETTER BUSINESS BUREAU OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

1600 S. GRANT ST.
LONGWOOD, FL 32750 US

New Principal Place of Business:

Current Mailing Address:

1600 S. GRANT ST.
LONGWOOD, FL 32750 US

New Mailing Address:

FEI Number: 59-2276708

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEPPER, JUDY
1600 S. GRANT ST.
LONGWOOD, FL 32750 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NUNLEY, RANDY
Address: 1600 S. GRANT ST.
City-St-Zip: LONGWOOD, FL 32750

Title: P () Delete
Name: PEPPER, JUDY
Address: 1600 S. GRANT ST.
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: STATON, MELINDA
Address: 1600 S. GRANT ST.
City-St-Zip: LONGWOOD, FL 32750

Title: PD (X) Change () Addition
Name: PEPPER, JUDY
Address: 1600 S. GRANT ST.
City-St-Zip: LONGWOOD, FL 32750

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUDY PEPPER

PRES

03/20/2009

Electronic Signature of Signing Officer or Director

Date